Application Data Sheet

Application Information

Application Type:: Regular Subject Matter:: Utility

Suggested Classification:: Suggested Group Art Unit::

CD-ROM or CD-R?:: None

Number of CD disks::

Number of Copies of CDs::

Sequence Submission?::

Computer Readable Form (CRF)::

No

Number of copies of CRF::

0

Title:: METHOD AND DEVICE FOR READING

POSTAL ARTICLE INSCRIPTIONS OR

DOCUMENT INSCRIPTIONS

Attorney Docket Number:: 2002P13357WOUS

Request for Early No

Publication?::

Request for Non-Publication?:: No
Suggested Drawing Figure:: 1
Total Drawing Sheets:: 5
Small Entity?:: No

Latin Name::

Variety Denomination Name::

Petition Included?:: No

Petition Type::

Licensed US Gov't Agency::

Contract or Grant Numbers::

Secrecy Order in Parent No

Appl.?::

Applicant Information

Applicant Authority Type:: Inventor

Primary Citizenship Country:: GERMANY

Status:: Full Capacity

Given Name:: INGOLF

Middle Name::

Family Name:: RAUH

City of Residence:: REICHENAU

State or Province of

Residence::

Country of Residence:: GERMANY

Street of Mailing Address:: OBERZELLER STRASSE

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City of Mailing Address:: REICHENAU

State or Province of Mailing Address::

Country of Mailing Address:: GERMANY

Postal or Zip Code of Mailing Address:: 78479

Applicant Authority Type:: Inventor

Primary Citizenship Country:: GERMANY

Status:: Full Capacity

Given Name:: MATTHIAS

Middle Name::

Family Name:: KRAUSE

City of Residence:: ORSINGEN-NENZINGEN

State or Province of

Residence::

Country of Residence:: GERMANY

Street of Mailing Address:: KIRNBERGSTRASSE

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City of Mailing Address:: ORSINGEN-NENZINGEN

State or Province of Mailing Address::

Country of Mailing Address:: GERMANY

Postal or Zip Code of Mailing Address:: 78359

Applicant Authority Type:: Inventor

Primary Citizenship Country:: USA

Status:: Full Capacity

Given Name:: DR. WALTER

Middle Name::

Family Name:: ROSENBAUM

City of Residence:: F-PARIS

State or Province of

Residence::

Country of Residence:: FRANCE

Street of Mailing Address:: 3, RUE EUGENE LABICHE

City of Mailing Address:: F-PARIS

State or Province of Mailing Address::

Country of Mailing Address:: FRANCE

Postal or Zip Code of Mailing Address:: 75116

Applicant Authority Type:: Inventor

Primary Citizenship Country::

Status:: Full Capacity

Given Name::

Middle Name::

Family Name::

City of Residence::

State or Province of

Residence::

Country of Residence::

Street of Mailing Address::

City of Mailing Address::

State or Province of Mailing Address::

Country of Mailing Address::

Postal or Zip Code of Mailing Address::				
Applicant Authority Type::		Inventor		
Primary Citizens	ship Country::			
Status::		Full Capacity		
Given Name::				
Middle Name::				
Family Name::				
City of Residence	ce::			
State or Provinc	ce of			
Residence::				
Country of Residence::				
Street of Mailing Address::				
City of Mailing Address::				
State or Province of Mailing Address::				
Country of Mailing Address::				
Postal or Zip Code of Mailing Address::				
Correspondence	Information			
Correspondence (Customer	28204		
Number::				
Representative 1	Information			
Representative Customer		28204		
Number::				
Domestic Priority Information				
Application::	Continuity	Parent	Parent	
	Type::	Application::	Filing	
			Date::	
This application	Continuation of	PCT/DE2003/0012796	8/21/03	
	•			

Foreign Priority Information

Country::	Application	Filing Date::	Priority
	Number::		Claimed::
DE	10240034.2	8/29/02	Yes

Assignment Information

Assignee Name::

SIEMENS AG

Street of Mailing Address:: P.O.Box

22 16 34

City of Mailing Address::

MUNICH

State or Province of Mailing Address::

Country of Mailing Address::

GERMANY

Postal or Zip Code of Mailing Address:: 80506